omprete and send t	his form, together	applicable fe	e(s), to: <u>Mai</u> or <u>Fa</u>	Commissioner P.O. Box 1450 Alexandria, Vi	for Patents irginia 22313-1450		
INSTRUCTIONS: And for	below of different officiwise	smitting the ISSUP atent, advance ordin Block 1, by (a)	E FEE and PUI	BLICATION FEE (if re	equired). Blocks 1 through 5 ses will be mailed to the current ess; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block I for 590 04/29/2005	any change of address)		Fee(s) Transmittal.	of mailing can only be used This certificate cannot be used ional paper, such as an assignm cate of mailing or transmission.	for any other accompanying nent or formal drawing, must	
EASTERN POINT GROTON, CT 063	340			I hereby certify the States Postal Servi- addressed to the I transmitted to the U	Certificate of Mailing or Transat this Fee(s) Transmittal is being ce with sufficient postage for final Stop ISSUE FEE address JSPTO (703) 746-4000, on the	ng deposited with the United irst class mail in an envelope s above, or being facsimile date indicated below.  (Depositor's name)	
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APPLICATION NO.	FILING DATE	FIRST NAMED IN		IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/667,182 09/17/2003 Yasuhiro Katsu PC25302A 8582 TITLE OF INVENTION: N-SUBSTITUTED PIPERIDINYL-IMIDAZOPYRIDINE COMPOUNDS AS 5-HT4 RECEPTOR MODULATORS							
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	) 	\$300	\$1700	07/29/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
HUANG, E	EVELYN MEI	1625		514-300000		. •	
Change of correspondence address (or Change of Correspondence or agents OR, alternatively,						W. Forman	
PLEASE NOTE: Unles recordation as set forth	in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear T a substitute for	on the patent. If an as filing an assignment.	ssignee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Pfizer Inc. New York, NY							
Please check the appropria	te assignee category or catego	ories (will not be pr	inted on the pate	ent): 🗖 Individual 🛭	Corporation or other private	group entity Government	
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
☑ Issue Fee ☐ A check in the amount of the fee(s) is enclosed.						•	
• • • •				Payment by credit card. Form PTO-2038 is attached.			
Deposit Account Number 16-1445 (enclose an extra copy of this form).							
	is (from status indicated above SMALL ENTITY status. See		b. Applican	t is no longer claiming S	MALL ENTITY status. See 37	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and interest as shown by the re	D is requested to apply the Iss Publication Fee (if required) cords of the United States Pa	ue Fee and Publica will not be accepte ant and Trademark	tion Fee (if any) d from anyone o Office.	or to re-apply any previ ther than the applicant; a	iously paid issue fee to the appl a registered attorney or agent; or	ication identified above. r the assignee or other party ir	
Authorized Signature _	Nook Je	Saill		Date	21 July 05		
Typed or printed name Frank W. Forman Registration No. 42,547							
Alexandria, Virginia 2231.	3-1430.				t by the public which is to file (to 12 minutes to complete, including comments on the amount of and Trademark Office, U.S. DRESS. SEND TO: Commission assist displays a valid OMB control of the control		

PART B - FEE(S) TRANSMITTAL